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Bib Data Sheet

CONFIRMATION NO. 7719

<b>SERIAL NUMBER</b> 10/812,908	<b>FILING OR 371(c) DATE</b> 03/31/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> P-5811-US
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**APPLICANTS**

Gavriel J. Iddan, Haifa, ISRAEL;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/046,541 01/16/2002 which claims benefit of 60/261,188 01/16/2001  
 This application 10/812,908  
 claims benefit of 60/458,438 03/31/2003  
 and claims benefit of 60/466,729 05/01/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

06/08/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> ISRAEL	<b>SHEETS DRAWING</b> 7	<b>TOTAL CLAIMS</b> 32	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged Examiner's Signature:  Initials: 				

**ADDRESS**

49443

**TITLE**

Method and device for imaging body lumens

<b>FILING FEE RECEIVED</b> 1072	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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